PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application o	r Docket	Numbe
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OPE-023

CLAIMS AS FILED - PART I SMALL ENT							ENTIFY	OR	OTHER SMALL		
TOTAL CLAIMS		59		(Octobrill 2)		RATE	FEE) 	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC FI		OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			59 minus 20=		*39		X\$ 9=	351	OR	X\$18=	
INDEPENDENT CLAIMS 9 minu			nus 3 =	* -	İ	X42=	1	OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT						1.40	1		000		
* If the difference in column 1 is less than zero, enter			"0" in c	olumn 2	+140=	1-26	OR	+280=			
					Oldiffit Z	TOTAL	726	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					(Column 3)	SMAL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		+140=			+280=	
							TOTA		OR	TOTAL	
		(0.1		(0.1	۵)	(0.1	ADDIT. FE		OR	ADDIT. FEE	L
_		(Column 1) CLAIMS		(Colur		(Column 3)	r	LADDI)		ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=	X\$ 9=	i	OR	X\$18=	
ME	Independent	*	Minus	***		=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM						
							+140=		OR	+280=	
							TOTA ADDIT. FE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)			_	<u>.</u>	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ΔOM	Total	*	Minus	**		±	X\$ 9=		OR	X\$18≈	
AMENDMENT	Independent	*	Minus	***		Ξ	X42=	+		X84=	
L .	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	T CLAIM		\\\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-	 	OR	7.04=	
	If the entire to and	mn 4 in ince the co			- 40" ;	huma C	+140=		OR	+280≈	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE **********************************											
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											